

NOTICES OF SUBSTANTIVE POLICY STATEMENTS

The Administrative Procedure Act requires the publication of substantive policy statements issued by agencies (A.R.S. § 41-101(B)(14)). Substantive Policy Statements are written expressions which inform the general public of an agency's current approach to rule or regulation practice. Substantive policy statement does not include internal procedural documents which may only affect the internal procedures of the agency and does not impose additional requirements or penalties on regulated parties in accordance with A.R.S. Title 41.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Ventilator Care By LPN
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: May 1993
Date of last revision: July 1995
3. Summary of the contents of the substantive policy statement:
The opinion describes the conditions under which an LPN may care for stable ventilator-dependent clients.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is revised.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:
Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Vaginal Speculum Exam And Specimen Collection
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: November 1987
Date of last revision: May 1995
3. Summary of the contents of the substantive policy statement:
The opinion delineates conditions under which an RN may perform vaginal speculum exams and collect specimens for cytology and/or culture.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is revised.

Arizona Administrative Register
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5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Ultrasound: Limited OB/GYN Diagnostic

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: January 1997

Date of last revision: January 1997

3. Summary of the contents of the substantive policy statement:

The opinion states performance of OB/GYN diagnostic ultrasound is within the scope of practice for RNs who possess appropriate education and clinical experience. The opinion delineates the conditions under which an RN may perform limited diagnostic OB/GYN ultrasound.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is original.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Ultrasound: Therapeutic

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: January 1990

Date of last revision: November 1996

3. Summary of the contents of the substantive policy statement:

The opinion states it is within the scope of practice of an RN to administer therapeutic ultrasound treatment.

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4. A statement as to whether the substantive policy statement is a new statement or a revision:
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
T-Tube Advancing/Removal
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: May 1987
Date of last revision: November 1995
3. Summary of the contents of the substantive policy statement:
The opinion states it is within the scope of practice for an RN to advance and/or remove a T-tube with a physician order when the patient possesses a clearly established passway.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is revised.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Swan-Ganz Catheters
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: January 1990
Date of last revision: November 1994

Arizona Administrative Register
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3. **Summary of the contents of the substantive policy statement:**

The opinion delineates the conditions under which an RN may remove Swan Ganz catheters from the Pulmonary Artery.

4. **A statement as to whether the substantive policy statement is a new statement or a revision:**

This advisory opinion is revised.

5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**

Supervision of Nurse Externs by Professional Nurses

2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**

Date issued: March 1993

Date of last revision: January 1995

3. **Summary of the contents of the substantive policy statement:**

The opinion delineates the educational preparation qualifications of nurse externs and outlines appropriate nursing care skills they may perform under the supervision of a professional nurse.

4. **A statement as to whether the substantive policy statement is a new statement or a revision:**

This advisory opinion is revised.

5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**

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STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**

Supervision Definition

2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**

Date issued: December 1987

Arizona Administrative Register
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Date of last revision: December 1987

3. Summary of the contents of the substantive policy statement:

The opinion reviews R4-19-401(A)(B) which outline the functions that can be legally performed by LPNs. The opinion also defines supervision, and delineates the RN role in Supervision. Also provided are parameters to consider in determining appropriate RN accessibility when supervising LPNs.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is original.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Sigmoidoscopy: Flexible screening

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: January 1990

Date of last revision: March 1995

3. Summary of the contents of the substantive policy statement:

The opinion delineates the conditions under which an RN may perform flexible sigmoidoscopy for screening purposes.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Sheath Removal and Compression Clamp Placement

Arizona Administrative Register
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2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: March 1990
Date of last revision: January 1995
3. **Summary of the contents of the substantive policy statement:**
The opinion delineates the conditions under which an RN may remove intravascular (arterial or venous) sheaths and apply manual compression or compression clamps to puncture clamps.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
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STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
RNFA-RN First Assistant
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: October 1987
Date of last revision: July 1995
3. **Summary of the contents of the substantive policy statement:**
The opinion summarizes the Arizona State Board of Nursing's position regarding RN First Assistants and the Board's endorsement of the 1993 AORN official statement on the subject.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Prostaglandin Gel and Suppositories
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: March 1990
Date of last revision: May 1995
3. Summary of the contents of the substantive policy statement:
The opinion delineates the conditions under which an RN may apply prostaglandin gel for the purpose of cervical ripening or insert prostaglandin suppositories for the purpose of pregnancy termination as prescribed by a prescribing practitioner.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is revised.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Prehospital Nursing
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: September 1988
Date of last revision: July 1995
3. Summary of the contents of the substantive policy statement:
The opinion delineates the conditions under which an RN may function within the pre-hospital nurse role.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is revised.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
Persantine Stress Testing
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: July 1995
Date of last revision: July 1995
3. **Summary of the contents of the substantive policy statement:**
The opinion states it is NOT within the scope of practice of an RN to administer IV persantine for purposes of stress testing without a physician present.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is new.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
Name: Executive Director of the Arizona State Board of Nursing
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
Peripheral Intravenous Therapy by Licensed Practical Nurses
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date Issued: July 1995
Date of last revision: May 1997
3. **Summary of the contents of the substantive policy statement:**
The opinion delineates the conditions under which LPNs can perform venipuncture and administer approved IV fluids, solutions and medications. The opinion also describes the process by which agencies who wish to teach LPN IV courses can apply for and obtain the Board approved Curriculum.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Pacemaker Wires

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: January 1990

Date of last revision: January 1995

3. Summary of the contents of the substantive policy statement:

The opinion delineates the conditions under which an RN may remove transvenous temporary pacemaker wires.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

P. I. C. Lines, insertion

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: October 1997

Date of last revision: March 1995

3. Summary of the contents of the substantive policy statement:

The opinion delineates the conditions under which an RN may insert and manage peripheral central venous catheters.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Orders: Accepting, Transcribing, Recopying and Signing

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: March 1987

Date of last revision: May 1995

3. Summary of the contents of the substantive policy statement:

The opinion reviews the R9-10-215(D) (Department of Health Services) which delineates acceptance, transcription, recopying and signing off of medical orders in acute care facilities. The opinion clarifies the Arizona State Board of Nursing's expectation as to the role of the RNs and LPNs in these activities in acute and non-hospital settings.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Neonatal Circumcision

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date Issued: September 1989

Date of last revision: May 1995

3. Summary of the contents of the substantive policy statement:

The opinion states that it is within the scope of practice for a pediatric Nurse Practitioner with education and training to perform neonatal circumcision.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

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1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Multiple Licensure/Certification

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date Issued: May 1991

Date of last revision: July 1997

3. Summary of the contents of the substantive policy statement:

The opinion clarifies levels and areas of accountability and legal responsibility for nurses who possess multiple licenses or certificates in other areas of expertise.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Medicet

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: January 1990

Date of last revision: January 1995

3. Summary of the contents of the substantive policy statement:

The opinion delineates the conditions under which a licensed nurse may prepare medication devices for facilitating the ultimate user's self-administration or subsequent taking of medications.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Medications, Carrying by RNs

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: May 1988

Date of last revision: November 1994

3. Summary of the contents of the substantive policy statement:

The opinion delineates the conditions under which licensed nurses may carry medications to be administered under physician orders or established procedures.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Lumbar Puncture

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: May 1988

Date of last revision: November 1994

3. Summary of the contents of the substantive policy statement:

The opinion delineates the conditions under which an RN may perform lumbar punctures.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

Notices of Substantive Policy Statements

Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365

6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:

Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Leg Vein Sclerotherapy

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: September 1991

Date of last revision: July 1995

3. Summary of the contents of the substantive policy statement:

The opinion delineates the conditions under which an RN may perform sclerotherapy on appropriate spider veins and varicose veins in the legs under the supervision of a licensed physician with expertise in sclerotherapy.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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Fax: (602) 906-9365

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Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Lasers (Pigment and Vascular Specific) for Cutaneous Procedures

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: November 1997

Date of last revision: November 1997

3. Summary of the contents of the substantive policy statement:

The opinion describes the requirements that must be met for an RN to perform cutaneous procedures using pigment and vascular specific lasers.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is new.

Notices of Substantive Policy Statements

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Intubation, Endotracheal, Esophageal gastric Airway, Esophageal Obturator airway.

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: March 1990

Date of last revision: July 1996

3. Summary of the contents of the substantive policy statement:

The opinion delineates the conditions under which an RN may insert endotracheal tubes, esophageal gastric airways or obturator airways in an emergency.

4. A statement as to whether the substantive policy statement is a new statement or a revision:

This advisory opinion is revised.

5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:

Name: Executive Director of the Arizona State Board of Nursing
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Phoenix, Arizona 85020
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:

Intraventricular Implanted Devices

2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:

Date issued: November 1992

Date of last revision: November 1995

3. Summary of the contents of the substantive policy statement:

The opinion delineates the condition under which an RN may aspirate cerebrospinal fluid and administer therapeutic agents via an intravenous implanted device (Ommaya reservoir).

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4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. **Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:**
Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
Intravenous Administration of Contrast Media
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: October 1988
Date of last revision: September 1996
3. **Summary of the contents of the substantive policy statement:**
The opinion delineates the conditions under which an RN may administer contrast media for diagnostic radiological procedures.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
Intrauterine/Intracervical Insemination
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: October 1997
Date of last revision: October 1997
3. **Summary of the contents of the substantive policy statement:**
The opinion delineates the conditions under which an RN may perform intrauterine/intracervical insemination.

Arizona Administrative Register
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4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is new.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:
Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Intraosseous Cannulation
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: March 1990
Date of last revision: March 1995
3. Summary of the contents of the substantive policy statement:
The opinion delineates the conditions under which an RN may insert intraosseous lines and administer fluids, medication and blood products.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is revised.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:
Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Intra-Aortic Balloon Removal
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: November 1989
Date of last revision: November 1994
3. Summary of the contents of the substantive policy statement:

Arizona Administrative Register
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The opinion states it is NOT within the scope of practice for an RN to remove an intra-aortic balloon.

4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is revised.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:
Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Injection of Lidocaine: Local infiltration for Femoral Sheath Removal
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: September 1996
Date of last revision: September 1996
3. Summary of the contents of the substantive policy statement:
The opinion delineates the conditions under which an RN may inject Lidocaine by local infiltration for pain control prior to femoral sheath removal.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is original.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:
Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Injection of Lidocaine: Liposuction
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: November 1989
Date of last revision: September 1996

Arizona Administrative Register
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3. **Summary of the contents of the substantive policy statement:**

The opinion states it is NOT within the scope of practice for an RN to inject xylocaine for liposuction.

4. **A statement as to whether the substantive policy statement is a new statement or a revision:**

This advisory opinion is revised.

5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**

Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
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Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**

Foley Catheter: Use of Instrumentation to deflate a malfunctioning foley catheter balloon.

2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**

Date issued: November 1992

Date of last revision: July 1995

3. **Summary of the contents of the substantive policy statement:**

The opinion delineates the conditions under which a licensed nurse may use appropriate instrumentation to deflate a malfunctioning foley catheter balloon.

4. **A statement as to whether the substantive policy statement is a new statement or a revision:**

This advisory opinion is revised.

5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**

Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
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6. **Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:**

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**

Arterial line insertion and Medication Administration

2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**

Date issued: July 1987

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Date of last revision: July 1995

3. **Summary of the contents of the substantive policy statement:**

The opinion delineates the conditions under which an RN may insert and/or administer medication via an intra-arterial line.

4. **A statement as to whether the substantive policy statement is a new statement or a revision:**

This advisory opinion is revised.

5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**

Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
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6. **Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:**

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**

Analgesia: Epidural

2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**

Date issued: January 1990

Date of last revision: July 1997

3. **Summary of the contents of the substantive policy statement:**

The opinion describes the conditions under which RNs can administer and manage epidural analgesia. The opinion also describes conditions and requirements for monitoring of epidural analgesia for obstetrical labor and delivery patients

4. **A statement as to whether the substantive policy statement is a new statement or a revision:**

This advisory opinion is revised.

5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**

Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**

Anesthesia: Epidural

2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**

Arizona Administrative Register
Notices of Substantive Policy Statements

Date issued: January 1987

Date of last revision: January 1997

3. **Summary of the contents of the substantive policy statement:**
The opinion reviews the education preparation and physician supervision necessary for RNs to administer epidural anesthesia.

4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.

5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**

Name: Executive Director of the Arizona State Board of Nursing

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**

Fetal Scalp Electrodes

2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**

Date issued: March 1990

Date of last revision: November 1994

3. **Summary of the contents of the substantive policy statement:**

The opinion delineates the conditions under which RNs may apply and remove fetal scalp electrodes.

4. **A statement as to whether the substantive policy statement is a new statement or a revision:**

This advisory opinion is revised.

5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**

Name: Executive Director of the Arizona State Board of Nursing

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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**

Amniotomy

Arizona Administrative Register
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2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: November 1988
Date of last revision: May 1995
3. **Summary of the contents of the substantive policy statement:**
The opinion states that amniotomy is NOT within the scope of practice of Registered Nurses. The opinion also reviews the secondary use of amniotomy in the process of fetal scalp electrode placement and delineates general requirements and instructional course content RNs must have to perform the procedure under those conditions.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. **Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:**
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
Blood Cell Saving
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: November 1990
Date of last revision: July 1995
3. **Summary of the contents of the substantive policy statement:**
The opinion delineates the conditions under which an RN may operate a blood cell saver device.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
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Arizona Administrative Register
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
Bone Marrow Aspiration and Biopsy
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: May 1993
Date of last revision: November 1994
3. **Summary of the contents of the substantive policy statement:**
The opinion delineates the conditions under which an RN may perform bone marrow aspiration and biopsy.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
Name: Executive Director of the Arizona State Board of Nursing
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Phoenix, Arizona 85020
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6. **Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:**
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
Clinical Nurse Specialists in Psychiatric/Mental Health Nursing
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: March 1995
Date of last revision: March 1995
3. **Summary of the contents of the substantive policy statement:**
The opinion states that the Arizona State Board of Nursing recognizes Psychiatric/Mental Health Clinical Nurse Specialists. The opinion also describes their educational preparation, professional certification and areas of practice.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is new.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
Name: Executive Director of the Arizona State Board of Nursing
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
Conscious Sedation for Diagnostic Surgical Procedures
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: July 1990
Date of last revision: October 1997
3. **Summary of the contents of the substantive policy statement:**
The opinion describes the conditions under which Registered Nurses may administer medications intravenously as supplemental analgesia/sedation for diagnostic or surgical procedures.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
Name: Executive Director of the Arizona State Board of Nursing
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. **Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:**
Contrast Media, Injection into Coronary Arteries
2. **Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:**
Date issued: July 1988
Date of last revision: May 1997
3. **Summary of the contents of the substantive policy statement:**
The opinion describes the conditions under which an RN may inject contrast media into coronary arteries.
4. **A statement as to whether the substantive policy statement is a new statement or a revision:**
This advisory opinion is revised.
5. **The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:**
Name: Executive Director of the Arizona State Board of Nursing
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Phoenix, Arizona 85020
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NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Death, Assessment of .
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: May 1994
Date of last revision: May 1994
3. Summary of the contents of the substantive policy statement:
The opinion differentiates between medical certification of death and assessment and pronouncement of death. The opinion delineates the appropriate role of the physician, RN and LPN in these activities.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is original.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
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Phoenix, Arizona 85020
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Fax: (602) 906-9365
6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:
Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT
STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Debridement, Sharp Wound
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: May 1993
Date of last revision: January 1995
3. Summary of the contents of the substantive policy statement:
The opinion delineates the conditions under which an RN may perform sharp wound debridement.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is revised.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:
Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Decision-Making Model for Determining RN/LPN Scope of Practice
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: May 1993
Date of last revision: March 1996
3. Summary of the contents of the substantive policy statement:
The opinion provides algorithms with appropriate factors and questions to consider in determining if a given procedure may be done by an RN or LPN or delegated by an RN or other health care workers.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is revised.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:
Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.

NOTICE OF AGENCY SUBSTANTIVE POLICY STATEMENT

STATE BOARD OF NURSING

1. Subject of the substantive policy statement and the substantive policy statement number by which the policy statement is referenced:
Deep Sedation
2. Date the substantive policy statement was issued and the effective date of the policy statement if different from the issuance date:
Date issued: September 1996
Date of last revision: September 1996
3. Summary of the contents of the substantive policy statement:
This opinion describes the conditions under which an RN may administer medication to provide deep sedation for ventilator patients. The opinion also clarifies that RN's may not administer anesthetics.
4. A statement as to whether the substantive policy statement is a new statement or a revision:
This advisory opinion is original.
5. The name, address, and telephone number of the person to whom questions and comments about the substantive policy statement may be directed:
Name: Executive Director of the Arizona State Board of Nursing
Address: 1651 East Morten Avenue
Phoenix, Arizona 85020
Telephone: (602) 331-8111, Ext. 133
Fax: (602) 906-9365
6. Information about where a person may obtain a copy of the substantive policy statement and the costs for obtaining the policy statement:

Arizona Administrative Register
Notices of Substantive Policy Statements

Copies of the Board of Nursing substantive policy statements or "Advisory Opinions" can be ordered from the Board of Nursing office by calling or writing to the address listed in question #5. The entire set can be purchased for fifty cents (.50) per page.